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Attorneys for Plaintiff  
ALLSTATE LIFE INSURANCE COMPANY,  
THE TRAVELERS INSURANCE COMPANY and  
THE TRAVELERS LIFE AND ANNUITY COMPANY

LAW OFFICES OF STEVEN A. FABBRO  
Steven A. Fabbro (SBN: 107973)  
8 California Street, 8<sup>th</sup> Floor  
San Francisco, California 94111  
Telephone: (415)391-6850  
Facsimile: (415)391-6856

Attorneys for Defendant  
XANTHI AVDALAS

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

ALLSTATE LIFE INSURANCE COMPANY, )  
THE TRAVELERS INSURANCE COMPANY, )  
THE TRAVELERS LIFE AND ANNUITY )  
COMPANY )

Plaintiffs,

v.

XANTHI AVDALAS AND THE ESTATE OF )  
EPAMINONDAS AVDALAS, )

Defendants. )

Case No. C 04-04569 JL

**STIPULATION FOR ENTRY OF  
JUDGMENT; [PROPOSED]  
JUDGMENT**

Pursuant to Federal Rules of Civil Procedure 54, 57 and 58, Plaintiffs Allstate Life Insurance Company ("Allstate"), The Travelers Insurance Company ("TIC") and the Travelers Life and Annuity Company ("TLAC") (collectively, the "Plaintiffs") and Defendant Xanthi Avdalas ("Avdalas") hereby stipulate to entry of judgment in this action as follows and respectfully request that the Court enter the proposed judgment attached hereto:

1. On October 28, 2004, the Plaintiffs filed a complaint for interpleader and declaratory relief in this action.

2. This court has subject matter jurisdiction over this interpleader and declaratory relief action pursuant to Federal Rule of Civil Procedure 22, 28 U.S.C. § 2201(a), and 28 U.S.C. § 1332 (diversity jurisdiction), in that Allstate's citizenship is the state of Illinois and TIC's and TLAC's citizenship is the state of Connecticut, and plaintiffs' citizenship is diverse from the citizenship of each defendant, and the amount in controversy exceeds \$75,000.

3. On or about March 14, 2003, the San Francisco Superior Court approved a settlement agreement between: (1) decedent Epaminondas Avdalas and Xanthi Avdalas, individually and as husband and wife, and Xanthi Avdalas, as Guardian Ad Litem of Epaminondas Avdalas; and (2) *inter alia*, Scottsdale Insurance Company, and Gulf Insurance Company. Scottsdale Insurance Company agreed to pay Xanthi Avdalas, as Guardian of Epaminondas Avdalas, \$1,250 per month, 2% compounding annually, for the remainder of the natural life of Epaminondas Avdalas, guaranteed for a total of 180 months, commencing on or about April 15, 2003. Gulf Insurance Company agreed to pay Xanthi Avdalas, as Guardian of Epaminondas Avdalas, \$1,250 per month, 2% compounding annually, for the remainder of the natural life of Epaminondas Avdalas, guaranteed for a total of 180 months, commencing on or about April 15, 2003. The agreement states that in the event Mr. Avdalas dies, payment will be made to the beneficiary, as designated in writing by Xanthi Avdalas.

## Plaintiff Allstate

4. On or about March 14, 2003, pursuant to a Uniform Qualified Assignment, Allstate Assignment Company assumed Scottsdale Insurance Company's liabilities to make the periodic payments under the settlement agreement. Thereafter, plaintiff Allstate Life Insurance Company issued a single premium immediate life annuity ("annuity") under which it agreed to make the periodic monthly payments. A copy of the annuity, policy number 90 310 374, as well as the annuity application is attached as Exhibit A to the complaint. Epaminondas Avdalas is listed as the Measuring Life and the Payee as "Xanthi Avdalas, Guardain [sic] of Epaminondas Avdalas." On the annuity application information sheet, Xanthi Avdalas designated "Estate of

1 Epaminondas Avdalas” as the beneficiary. Under the terms of the annuity, the payments will be  
2 made to the payee while the Measuring Life is alive. If the Measuring Life is not living, the  
3 payments will be made to the beneficiary.

4 5. Allstate commenced payments to the payee, defendant Xanthi Avdalas, on or  
5 about April 15, 2003. On February 12, 2004, Epaminondas Avdalas died. Allstate made  
6 payments to Xanthi Avdalas as payee in March, April and May 2004, before it learned of Mr.  
7 Avdalas’ death on or about May 24, 2004. After learning of Mr. Avdalas’ death, Allstate ceased  
8 making payments to Xanthi Avdalas. Following Mr. Avdalas’ death, Xanthi Avdalas claimed,  
9 and continues to claim, that she is entitled to the proceeds of the annuity.

10 6. Allstate commenced this suit for interpleader and declaratory relief because it  
11 believed that it could not safely determine the proper beneficiary, or beneficiaries, of the annuity  
12 without risking exposure to multiple liabilities.

13 Plaintiffs TIC and TLAC

14 7. On or about March 14, 2003, TLAC assumed Gulf Insurance Company’s  
15 liabilities to make the periodic payments under the settlement agreement, using a single premium  
16 immediate life annuity (“annuity”) to be issued by TIC. A copy of the annuity application is  
17 attached as Exhibit B to the Complaint. The application lists Epaminondas Avdalas as the  
18 Measuring Life, and the payee as “Xanthi Avdalas, as Guardian [sic] of Epaminondas Avdalas.”  
19 The annuity application designates the Estate of Epaminondas Avdalas as beneficiary. The  
20 annuity itself was never actually issued because TIC did not receive papers finalizing Xanthi  
21 Avdalas’ status as legal guardian. A copy of contract number 4950NW55450, which was to be  
22 issued and under which TIC operated as if it had been issued, is attached as Exhibit C to the  
23 Complaint. The contract lists Epaminondas Avdalas as the Measuring Life, the Payee as  
24 “Xanthi Avdalas, as Guardian of Epaminondas Avdalas,” and the beneficiary as “Estate of  
25 Epaminondas Avdalas.” The contract specifications state, “If the Measuring Life dies before a  
26 minimum 180 payments have been made, the remaining payments will continue to the  
27 beneficiary.”  
28



the beneficiaries of the payments under the annuity policies. Payments should be made in equal (50%) shares to George Avdalas and Konstantine Avdalas, or their representative share to their heirs, under the annuity policies until they expire under their own terms.

15. Plaintiff Allstate shall release to Xanthi Avdalas all accrued, unpaid payments from June 15, 2004 up to and including September 15, 2005, pursuant to the terms set forth above in Paragraph 3 in the amount of \$20,553.00 (\$1275.00 per month for the months of June 2004 through and including March 2005, and \$1300.50 per month for the months of April 2005 through and including September 2005), and Plaintiff Allstate shall resume payments to Avdalas pursuant to the terms of the underlying settlement agreement and the annuity.

16. Plaintiffs TIC and TLAC shall release to Xanthi Avdalas all accrued, unpaid payments from June 15, 2004 up to and including September 15, 2005, pursuant to the terms set forth above in Paragraph 3 in the amount of \$20,553.00 (\$1275.00 per month for the months of June 2004 through and including March 2005, and \$1300.50 per month for the months of April 2005 through and including September 2005), and Plaintiffs TIC and TLAC shall resume payments to Avdalas pursuant to the terms of the underlying settlement agreement and the annuity.

17. The parties hereby agree to bear their own costs and fees.

DATED: September 19<sup>th</sup>, 2005  
As to Form Only

SEYFARTH SHAW LLP

By 

Robert Milligan

Attorneys for Plaintiff  
ALLSTATE LIFE INSURANCE  
COMPANY, THE TRAVELERS  
INSURANCE COMPANY and  
THE TRAVELERS LIFE AND ANNUITY  
COMPANY

DATED: September 16<sup>th</sup>, 2005

ALLSTATE LIFE INSURANCE  
COMPANY

By 

ALLSTATE LIFE INSURANCE  
COMPANY

1 DATED: September 15, 2005

THE TRAVELERS INSURANCE  
COMPANY AND THE TRAVELERS  
LIFE AND ANNUITY COMPANY

By 

THE TRAVELERS INSURANCE  
COMPANY AND THE TRAVELERS  
LIFE AND ANNUITY COMPANY

2  
3  
4  
5  
6 DATED: September \_\_, 2005  
As to Form Only

LAW OFFICES OF STEVEN A. FABBRO

By \_\_\_\_\_

Steven A. Fabbro

Attorneys for Defendant  
XANTHI AVDALAS

7  
8  
9  
10 DATED: September \_\_, 2005

XANTHI AVDALAS

By \_\_\_\_\_

XANTHI AVDALAS

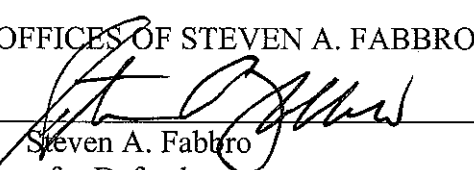
1 DATED: September \_\_, 2005  
2  
3

THE TRAVELERS INSURANCE  
COMPANY AND THE TRAVELERS LIFE  
AND ANNUITY COMPANY

By \_\_\_\_\_  
THE TRAVELERS INSURANCE  
COMPANY AND THE TRAVELERS LIFE  
AND ANNUITY COMPANY

4  
5  
6 DATED: September 14, 2005  
7 **As to Form Only**

LAW OFFICES OF STEVEN A. FABBRO

By  \_\_\_\_\_  
Steven A. Fabbro  
Attorneys for Defendant  
XANTHI AVDALAS

8  
9  
10 DATED: September 14, 2005  
11

XANTHI AVDALAS

By  \_\_\_\_\_  
XANTHI AVDALAS  
12  
13  
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**[Proposed] Judgment**

Having considered the foregoing stipulation, and good cause appearing, the Court hereby enters judgment as follows:

Defendant Xanthi Avdalas is the proper beneficiary of the annuities in this action and Avdalas should continue to receive payments under the annuity policies until they expire under their own terms.

Should Avdalas die prior to the expiration of the annuity policies, Avdalas irrevocably designates George Avdalas and Konstantine Avdalas, her sons, or their representative share to their heirs, as the beneficiaries of the payments under the annuity policies. Payments should be made in equal (50%) shares to George Avdalas and Konstantine Avdalas, or their representative share to their heirs, under the annuity policies until they expire under their own terms.

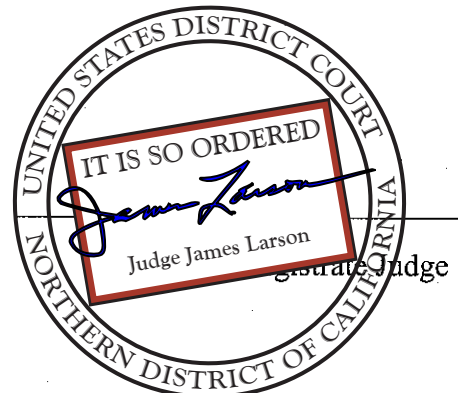
Plaintiff Allstate shall release to Xanthi Avdalas all accrued, unpaid payments from June 15, 2004 up to and including September 15, 2005, pursuant to the terms set forth above in Paragraph 3 in the amount of \$20,553.00 (\$1275.00 per month for the months of June 2004 through and including March 2005, and \$1300.50 per month for the months of April 2005 through and including September 2005), and Plaintiff Allstate shall resume payments to Avdalas pursuant to the terms of the underlying settlement agreement and the annuity.

Plaintiffs TIC and TLAC shall release to Xanthi Avdalas all accrued, unpaid payments from June 15, 2004 up to and including September 15, 2005, pursuant to the terms set forth above in Paragraph 3 in the amount of \$20,553.00 (\$1275.00 per month for the months of June 2004 through and including March 2005, and \$1300.50 per month for the months of April 2005 through and including September 2005), and Plaintiffs TIC and TLAC shall resume payments to Avdalas pursuant to the terms of the underlying settlement agreement and the annuity.

The parties are to bear their own costs and fees.

IT SO ORDERED

Dated: 9/27/05





# Exhibit A

**RELEASE**

I, KONSTANTINE AVDALAS, am the child of decedent Epaminondas Avdalas. I have read the complaint in Allstate Life Insurance Co., et al. v. Xanthi Avdalas, et al., Case No. C 04-04569 JL, and I am familiar with the parties' dispute. I have read and understand the stipulation for entry of judgment that the parties have entered in this action. I agree that my mother Xanthi Avdalas is the proper beneficiary of the annuities at issue in the case and that Xanthi Avdalas should continue to receive payments under the annuity policies until they expire under their own terms. I do not claim any interest in the annuities unless or until my mother Xanthi Avdalas dies before the expiration of the terms of the annuities. I hereby release Allstate Insurance Company, the Travelers Insurance Company, the Travelers Life and Annuity Company and their predecessors and successors in interest for any liability arising out of their payments to Xanthi Avdalas under the annuity policies.

Dated: \_\_\_\_\_

9-14-05

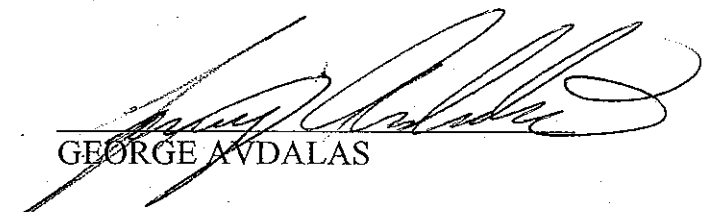
  
\_\_\_\_\_  
KONSTANTINE AVDALAS

**RELEASE**

I, GEORGE AVDALAS, am the child of decedent Epaminondas Avdalas. I have read the complaint in Allstate Life Insurance Co., et al. v. Xanthi Avdalas, et al., Case No. C 04-04569 JL, and I am familiar with the parties' dispute. I have read and understand the stipulation for entry of judgment that the parties have entered in this action. I agree that my mother Xanthi Avdalas is the proper beneficiary of the annuities at issue in the case and that Xanthi Avdalas should continue to receive payments under the annuity policies until they expire under their own terms. I do not claim any interest in the annuities unless or until my mother Xanthi Avdalas dies before the expiration of the terms of the annuities. I hereby release Allstate Insurance Company, the Travelers Insurance Company, the Travelers Life and Annuity Company and their predecessors and successors in interest for any liability arising out of their payments to Xanthi Avdalas under the annuity policies.

Dated:

Sept 15, 2005

  
GEORGE AVDALAS

# Exhibit B

**XANTHI AVDALAS' REPRESENTATIONS AND WARRANTIES AND  
AGREEMENT TO INDEMNIFY**

I, Xanthi Avdalas, make the following representations and warranties and agreement to indemnify Allstate Insurance Company, the Travelers Insurance Company, the Travelers Life and Annuity Company and their predecessors and successors in interest.

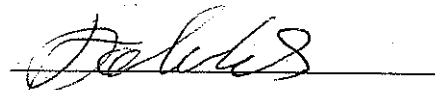
I have read the complaint in Allstate Life Insurance Co., et al. v. Xanthi Avdalas, et al., Case No. C 04-04569 JL, and I am familiar with the parties' dispute. I have willingly entered into the stipulation for entry of judgment in this action. I am the proper beneficiary of the annuities at issue in the case and I should continue to receive payments under the annuity policies until they expire under their own terms. I am not aware of anyone claiming any interest in the annuity policies. I have two children. My children George Avdalas and Konstantine Avdalas do not claim any interest in the annuity policies. I warrant that there are no parties, creditors or otherwise, with an interest in the annuity policies.

There is no executor for the Estate of Epaminondas Avdalas and it is not contemplated that his estate will pass through probate. If my husband's estate does pass through probate, I agree to sign and be bound by the attached representations and warranties and agreement to indemnify as well as the stipulation for entry of judgment.

Should anyone claim any interest in the annuity policies, I agree to defend, indemnify and hold Allstate Insurance Company, the Travelers Insurance Company, the Travelers Life and Annuity Company and their predecessors and successors in interest harmless from and against any demands, claims, liability, suits, damages, and actions brought against them arising from or relating to, either directly or indirectly, any payments made to Xanthi Avdalas under the annuity policies and payments made to my beneficiaries George Avdalas and Konstantine Avdalas should I die prior to the expiration of the annuity policies. The duty to defend includes the duty to pay reasonable attorneys' fees incurred in defending such claims and the duty to indemnify includes the duty to pay any amount imposed by an administrative agency or judgment or settlement reached in a court action.

I declare under penalty of perjury under the laws of the United States that the foregoing representations and warranties are true and correct and I agree to be bound by the terms of this agreement.

Dated: 9 14 05



Xanthi Avdalas

Travelers Life &amp; Annuity

STRUCTURED SETTLEMENTS  
PO BOX 980024  
HARTFORD CT 06189-0024  
1-800-370-6785

119-890 A 07093197

NOT VALID BEFORE  
09/15/05

998801405 4950NW5450 SS

PAY \$ 20,553.00 \*\*

TWENTY THOUSAND FIVE HUNDRED FIFTY THREE &amp; 00/100 DOLLARS \*\*\*\*\*

Pay to the order of

XANTHI AVDALAS

Citibank Delaware  
One Penn's Way  
New Castle, DE 18728

AUTHORIZED SIGNATURE

PLEASE CASH WITHIN 60 DAYS

DO NOT DETACH

⑈07093197⑈ ⑆031100209⑆ 38618578⑈



Allstate Life Insurance Company  
 544 Lakeview Pkwy L2B  
 Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870

Fax: 1-877-690-4092

XANTHI AVDALAS  
 2227 24TH AVE.  
 SAN FRANCISCO CA 94116-1747

Due Date: June 15, 2004  
 Issue Date: September 15, 2005  
 Check Number: 2191639  
 Contract Number: 90310374  
 Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on June 15, 2004.

C11TE0BB.N01

B-2055MIV

Please detach the check below before depositing.

00011



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
 ROSELLE, ILLINOIS  
 September 15, 2005

2191639

70-1558  
 719

Contract Number: 90310374

Due Date: June 15, 2004

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
 Settlement Controlled Disbursement Account

Joan M. Crockett  
 Samuel H. Pille

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE

SEE DETAILS ON BACK

002191639 0719155801 04 168 097 11

Allstate Life Insurance Company  
544 Lakeview Pkwy L2B  
Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
Fax: 1-877-690-4092

XANTHI AVDALAS  
2227 24TH AVE.  
SAN FRANCISCO CA 94116-1747

Due Date: July 15, 2004  
Issue Date: September 15, 2005  
Check Number: 2191640  
Contract Number: 90310374  
Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on July 15, 2004.

C11TE0BG.N01  
B-2055MW

Please detach the check below before depositing.

Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
ROSELLE, ILLINOIS  
September 15, 2005

2191640  
70-1558  
719

Contract Number: 90310374

Due Date: July 15, 2004

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF: XANTHI AVDALAS

Allstate Life Insurance Company Structured  
Settlement Controlled Disbursement Account

*Joan M. Crockett*  
*Samuel H. Pich*

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE

SECURITY FEATURES  
MICROFILM  
SEE REVERSE SIDE

⑈02191640⑈ ⑆071915580⑆ 04⑈168⑈097⑈4⑈



Allstate Life Insurance Company  
 544 Lakeview Pkwy L2B  
 Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
 Fax: 1-877-690-4092

XANTHI AVDALAS  
 2227 24TH AVE.  
 SAN FRANCISCO CA 94116-1747

Due Date: August 15, 2004  
 Issue Date: September 15, 2005  
 Check Number: 2191641  
 Contract Number: 90310374  
 Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on August 15, 2004.

C11TE0BM.N01  
 B-2053MW

Please detach the check below before depositing.

Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
 ROSELLE, ILLINOIS  
 September 15, 2005

2191641  
 70-1558  
 719

Contract Number: 90310374

Due Date: August 15, 2004

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF: XANTHI AVDALAS

Allstate Life Insurance Company Structured  
 Settlement Controlled Disbursement Account

*Joan M Crockett*  
*Samuel H. Peltz*

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE

SECURITY FEATURES  
 ALLSTATE LIFE INSURANCE COMPANY

002191641 00719155801 04 168 097 4

Allstate Life Insurance Company  
544 Lakeview Pkwy L2B  
Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
Fax: 1-877-690-4092

XANTHI AVDALAS  
2227 24TH AVE.  
SAN FRANCISCO CA 94116-1747

Due Date: September 15, 2004  
Issue Date: September 15, 2005  
Check Number: 2191642  
Contract Number: 90310374  
Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on September 15, 2004.

C11TE0BQ.N01  
B-2055MW

Please detach the check below before depositing.

00014



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
ROSELLE, ILLINOIS  
September 15, 2005

2191642  
70-1558  
719

Contract Number: 90310374  
Due Date: September 15, 2004

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF: XANTHI AVDALAS

Allstate Life Insurance Company Structured  
Settlement Controlled Disbursement Account

Joan M. Crockett  
Samuel H. Pith

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191642 071915580 04 168 097 4



Allstate Life Insurance Company  
 544 Lakeview Pkwy L2B  
 Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
 Fax: 1-877-690-4092

XANTHI AVDALAS  
 2227 24TH AVE.  
 SAN FRANCISCO CA 94116-1747

Due Date: October 15, 2004  
 Issue Date: September 15, 2005  
 Check Number: 2191643  
 Contract Number: 90310374  
 Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on October 15, 2004.

C11TE0BW.N01  
 B-2055MIV

Please detach the check below before depositing.

Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
 ROSELLE, ILLINOIS  
 September 15, 2005

2191643

701558  
 719

Contract Number: 90310374

Due Date: October 15, 2004

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
 Settlement Controlled Disbursement Account

Joan M. Crockett  
 Samuel H. Peltz

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE

ALLSTATE LIFE INSURANCE COMPANY  
 ROSELLE, ILLINOIS 60068-1842

002191643 0719155801 041168097111

Allstate Life Insurance Company  
544 Lakeview Pkwy L2B  
Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
Fax: 1-877-690-4092

XANTHI AVDALAS  
2227 24TH AVE.  
SAN FRANCISCO CA 94116-1747

Due Date: November 15, 2004  
Issue Date: September 15, 2005  
Check Number: 2191644  
Contract Number: 90310374  
Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on November 15, 2004.

C11TE0BY.N01

B-2055MW

Please detach the check below before depositing.

00016



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
ROSELIE, ILLINOIS  
September 15, 2005

2191644

70-1558  
719

Contract Number: 90310374  
Due Date: November 15, 2004

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF: XANTHI AVDALAS

Allstate Life Insurance Company Structured  
Settlement Controlled Disbursement Account

Joan M. Crockett  
Samuel H. Pich

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191644 0071915580 04 168 097 4



Allstate Life Insurance Company  
544 Lakeview Pkwy L2B  
Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
Fax: 1-877-690-4092

XANTHI AVDALAS  
2227 24TH AVE.  
SAN FRANCISCO CA 94116-1747

Due Date: December 15, 2004  
Issue Date: September 15, 2005  
Check Number: 2191645  
Contract Number: 90310374  
Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on December 15, 2004.

C11TE0DY.N01  
B-2055MW

Please detach the check below before depositing.

00017



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
ROSELLE, ILLINOIS  
September 15, 2005

2191645  
70-1358  
719

Contract Number: 90310374  
Due Date: December 15, 2004

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
Settlement Controlled Disbursement Account

Joan M. Crockett  
Samuel H. Pich

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191645 0071915580 04 168 097 4

Allstate Life Insurance Company  
 544 Lakeview Pkwy L2B  
 Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870

Fax: 1-877-690-4092

XANTHI AVDALAS  
 2227 24TH AVE.  
 SAN FRANCISCO CA 94116-1747

Due Date: January 15, 2005  
 Issue Date: September 15, 2005  
 Check Number: 2191646  
 Contract Number: 90310374  
 Annuitant Name: Epaminandas Avdalas

## \*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on January 15, 2005.

C11TE0E1.N01  
 B-2055MW

Please detach the check below before depositing.



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
 ROSELLE, ILLINOIS  
 September 15, 2005

2191646

70-1558

719

Contract Number: 90310374

Due Date: January 15, 2005

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
 Settlement Controlled Disbursement Account

*Joan M. Crockett*  
*Samuel H. Piller*

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191646 0719155801 04 168 097 11



Allstate Life Insurance Company  
 544 Lakeview Pkwy L2B  
 Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
 Fax: 1-877-690-4092

XANTHI AVDALAS  
 2227 24TH AVE.  
 SAN FRANCISCO CA 94116-1747

Due Date: February 15, 2005  
 Issue Date: September 15, 2005  
 Check Number: 2191647  
 Contract Number: 90310374  
 Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on February 15, 2005.

C11TE0E6.N01

B-2055MIV

Please detach the check below before depositing.

00019



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
 ROSELLE, ILLINOIS  
 September 15, 2005

2191647

70-1558  
 719

Contract Number: 90310374

Due Date: February 15, 2005

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF: XANTHI AVDALAS

Allstate Life Insurance Company Structured  
 Settlement Controlled Disbursement Account

*Joan M. Crockett*  
*Samuel H. Pich*

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191647 0719155801 04 168 097 11

Allstate Life Insurance Company  
544 Lakeview Pkwy L2B  
Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
Fax: 1-877-690-4092

XANTHI AVDALAS  
2227 24TH AVE.  
SAN FRANCISCO CA 94116-1747

Due Date: March 15, 2005  
Issue Date: September 15, 2005  
Check Number: 2191648  
Contract Number: 90310374  
Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,275.00
Net Check Amount	\$1,275.00

This is for the payment due on March 15, 2005.

C11TE0ED.N01  
B-2055MW

Please detach the check below before depositing.

00020



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
ROSELLE, ILLINOIS  
September 15, 2005

2191648  
70-1558  
719

Contract Number: 90310374  
Due Date: March 15, 2005

\$1,275.00\*\*\*\*\*

PAY: One Thousand Two Hundred Seventy Five and No/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
Settlement Controlled Disbursement Account

Joan M. Crockett  
Samuel H. Pith

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191648 00719155801 04 168 097 11



Allstate Life Insurance Company  
 544 Lakeview Pkwy L2B  
 Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
 Fax: 1-877-690-4092

XANTHI AVDALAS  
 2227 24TH AVE.  
 SAN FRANCISCO CA 94116-1747

Due Date: April 15, 2005  
 Issue Date: September 15, 2005  
 Check Number: 2191649  
 Contract Number: 90310374  
 Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,300.50
Net Check Amount	\$1,300.50

This is for the payment due on April 15, 2005.

C11TE0EK.N01  
 B-2055MW

Please detach the check below before depositing.

00001



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
 ROSELLE ILLINOIS  
 September 15, 2005

2191649  
 70-1558  
 719

Contract Number: 90310374

Due Date: April 15, 2005

\$1,300.50\*\*\*\*\*

PAY: One Thousand Three Hundred and 50/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
 Settlement Controlled Disbursement Account

Joan M. Crockett  
 Samuel H. Piller

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191649 0719155801 04 168 097 14

Allstate Life Insurance Company  
544 Lakeview Pkwy L2B  
Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
Fax: 1-877-690-4092

XANTHI AVDALAS  
2227 24TH AVE.  
SAN FRANCISCO CA 94116-1747

Due Date: May 15, 2005  
Issue Date: September 15, 2005  
Check Number: 2191650  
Contract Number: 90310374  
Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,300.50
Net Check Amount	\$1,300.50

This is for the payment due on May 15, 2005.

C11TE0EP.N01

B-2055MW

Please detach the check below before depositing.

00022



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
ROSELLE, ILLINOIS  
September 15, 2005

2191650

70-1558  
719

Contract Number: 90310374

Due Date: May 15, 2005

\$1,300.50\*\*\*\*\*

PAY: One Thousand Three Hundred and 50/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
Settlement Controlled Disbursement Account

Joan M. Crockett  
Samuel H. Pich

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191650 00719155801 04 168 097 11



Allstate Life Insurance Company  
544 Lakeview Pkwy L2B  
Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
Fax: 1-877-690-4092

XANTHI AVDALAS  
2227 24TH AVE.  
SAN FRANCISCO CA 94116-1747

Due Date: June 15, 2005  
Issue Date: September 15, 2005  
Check Number: 2191651  
Contract Number: 90310374  
Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,300.50
Net Check Amount	\$1,300.50

This is for the payment due on June 15, 2005.

C11TE0EY.N01  
B-2053MW

Please detach the check below before depositing.

0003



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
ROSELLE, ILLINOIS  
September 15, 2005

2191651  
70-1558  
719

Contract Number: 90310374  
Due Date: June 15, 2005

\$1,300.50\*\*\*\*\*

PAY: One Thousand Three Hundred and 50/100 Dollars\*\*\*

TO THE ORDER OF: XANTHI AVDALAS

Allstate Life Insurance Company Structured  
Settlement Controlled Disbursement Account

Joan M. Crockett  
Samuel H. Pich

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191651 071915580 04 168 097 4

Allstate Life Insurance Company  
 544 Lakeview Pkwy L2B  
 Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
 Fax: 1-877-690-4092

XANTHI AVDALAS  
 2227 24TH AVE.  
 SAN FRANCISCO CA 94116-1747

Due Date: July 15, 2005  
 Issue Date: September 15, 2005  
 Check Number: 2191652  
 Contract Number: 90310374  
 Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,300.50
Net Check Amount	\$1,300.50

This is for the payment due on July 15, 2005.

C11TE0F4.N01  
 B-2055MW

Please detach the check below before depositing.

Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
 ROSELLE, ILLINOIS  
 September 15, 2005

2191652

70-1558  
 719

Contract Number: 90310374  
 Due Date: July 15, 2005

\$1,300.50\*\*\*\*\*

PAY: One Thousand Three Hundred and 50/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
 Settlement Controlled Disbursement Account

Joan M. Crockett  
 Samuel H. Pich

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE

SECRETARY'S  
 SIGNATURE  
 REQUIRED ON BACK

002191652007191558010411680097004



Allstate Life Insurance Company  
 544 Lakeview Pkwy L2B  
 Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
 Fax: 1-877-690-4092

XANTHI AVDALAS  
 2227 24TH AVE.  
 SAN FRANCISCO CA 94116-1747

Due Date: August 15, 2005  
 Issue Date: September 15, 2005  
 Check Number: 2191653  
 Contract Number: 90310374  
 Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,300.50
Net Check Amount	\$1,300.50

This is for the payment due on August 15, 2005.

C11TE0FB.N01

B-2055MW

Please detach the check below before depositing.

00025



Allstate Life Insurance Company

HARRIS CENTRAL N.A.  
 ROSELLE, ILLINOIS  
 September 15, 2005

2191653

70-1558  
 719

Contract Number: 90310374

Due Date: August 15, 2005

\$1,300.50\*\*\*\*\*

PAY: One Thousand Three Hundred and 50/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
 Settlement Controlled Disbursement Account

*Joan M. Crockett*  
*Samuel H. Pich*

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



002191653 0719155801 04116809711

Allstate Life Insurance Company  
544 Lakeview Pkwy L2B  
Vernon Hills IL 60061-1842

Telephone: 1-800-840-3870  
Fax: 1-877-690-4092

XANTHI AVDALAS  
2227 24TH AVE.  
SAN FRANCISCO CA 94116-1747

Due Date: September 15, 2005  
Issue Date: September 15, 2005  
Check Number: 2191654  
Contract Number: 90310374  
Annuitant Name: Epaminandas Avdalas

\*\*\*EXPLANATION OF BENEFITS\*\*\*

Total Gross Amount	\$1,300.50
Net Check Amount	\$1,300.50

This is for the payment due on September 15, 2005.

C11TE0FJ.N01

B-2055NW

Please detach the check below before depositing.

00005



Allstate Life Insurance Company

HARRIS CENTRAL N/A  
ROSELLE, ILLINOIS  
September 15, 2005

2191654

70-1538  
719

Contract Number: 90310374  
Due Date: September 15, 2005

\$1,300.50\*\*\*\*\*

PAY: One Thousand Three Hundred and 50/100 Dollars\*\*\*

TO THE ORDER OF XANTHI AVDALAS

Allstate Life Insurance Company Structured  
Settlement Controlled Disbursement Account

Joan M. Crockett  
Samuel H. Piller

VOID IF NOT PRESENTED WITHIN ONE HUNDRED AND EIGHTY DAYS OF THE DATE OF ISSUE



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the beneficiaries of the payments under the annuity policies. Payments should be made in equal (50%) shares to George Avdalas and Konstantine Avdalas, or their representative share to their heirs, under the annuity policies until they expire under their own terms.

15. Plaintiff Allstate shall release to Xanthi Avdalas all accrued, unpaid payments from June 15, 2004 up to and including September 15, 2005, pursuant to the terms set forth above in Paragraph 3 in the amount of \$20,553.00 (\$1275.00 per month for the months of June 2004 through and including March 2005, and \$1300.50 per month for the months of April 2005 through and including September 2005), and Plaintiff Allstate shall resume payments to Avdalas pursuant to the terms of the underlying settlement agreement and the annuity.

16. Plaintiffs TIC and TLAC shall release to Xanthi Avdalas all accrued, unpaid payments from June 15, 2004 up to and including September 15, 2005, pursuant to the terms set forth above in Paragraph 3 in the amount of \$20,553.00 (\$1275.00 per month for the months of June 2004 through and including March 2005, and \$1300.50 per month for the months of April 2005 through and including September 2005), and Plaintiffs TIC and TLAC shall resume payments to Avdalas pursuant to the terms of the underlying settlement agreement and the annuity.

17. The parties hereby agree to bear their own costs and fees.

DATED: September \_\_, 2005  
As to Form Only

SEYFARTH SHAW LLP

By \_\_\_\_\_  
Robert Milligan  
Attorneys for Plaintiff  
ALLSTATE LIFE INSURANCE  
COMPANY, THE TRAVELERS  
INSURANCE COMPANY and  
THE TRAVELERS LIFE AND ANNUITY  
COMPANY

DATED: September 16<sup>th</sup> 2005

ALLSTATE LIFE INSURANCE  
COMPANY

By \_\_\_\_\_  
ALLSTATE LIFE INSURANCE  
COMPANY